# COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

DIRECTORDS

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2020 FEB 18 PH 2: 12

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

### SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

| <u>-                                    </u>          |  |
|---|--|
| Allison Feikes  |  |
| Name of Traveler:                                     | · · · · · · · · · · · · · · · · · · ·  |
| Mike Braun  |  |
| Employing Office/Committee:                           |  |
|   | iversity's Hoover Institute            |
| Travel Expenses Paid by (List all sources):           |  |
| August 19-21, 2019                                    |  |
| Travel Date(s):                                       | 1 and invitation                       |
| Corrected R2, R1 Description/Title of Attached Forms: |  |
| •   |  |
|   |  |
|   |  |
|   | Incorrectly filled out or missing from |
| Purpose of Amendment (describe the reason for amend   | · ·                                    |
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|   | A                                      |
| 0/10/000  | Signature of Traveler)                 |
| <u> </u>  | (Signature of Traveler)                |
| (Date)  | (DISHULLIE OF LIGHEIS)                 |

(Revised 4/19/2010)

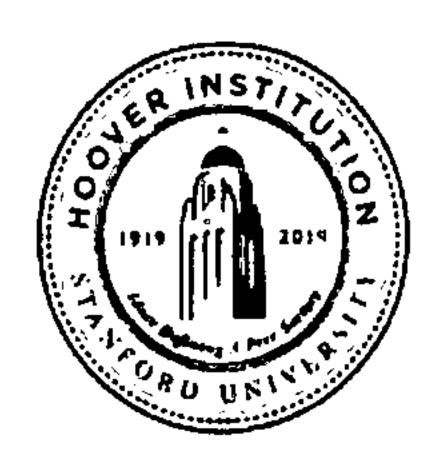
## **Employee Post-Travel Disclosure of Travel Expenses**

|        | Date    | e/Tim  | e Stai | mp:  |       |
|--------|---------|--------|--------|------|-------|
|        |         |        |        |      |       |
|        |         |        |        |      |       |
|        |         |        |        |      |       |
| avel e | xpenses | s that | have   | heen | or wi |

| *   | tule 35.2(a) and (c), I more me. I also certify that |   | sures with respect to      | travel expenses that have been or            | wi |
|---|--|---|----------------------------|--|----|
| ★ The <u>original</u> Employed     ★ A <u>copy</u> of the Prive | vate Sponsor Travel Cei                              | rization (Form RE-1), <u>A</u><br>rtification Form with all<br>y's Hoover Institute | AND attachments (itinerary | y, invitee list, etc.)                       |    |
| Private Sponsor(s) (li  |  |   | <u> </u>                   | <u>.                                    </u> |    |
| August<br>Travel date(s):                                       | t 19-21, 2019  |   |                            |  |    |
|   | C '1 1 - C'C   | n/a   |                            | •<br>•                                       |    |
| Name of accompanys<br>Relationship to Trave                     | ng family member (if a<br>eler: D Spouse D           | ny):<br>Child   | <u>.</u>                   |  |    |
| IF THE COST OF LOD  | OGING <b>DID NOT INCR</b><br>COSTS IN EMPLOYEE       | EASE DUE TO THE ACC<br>EXPENSES. (Attach addit                                      |                            | SE OR DEPENDENT CHILD, ONLY                  | Y  |
|   | Transportation Expenses                              | Lodging Expenses  | Meal Expenses              | Other Expenses (Amount & Description)        | -  |
| ☐ Good Faith Estimate ☐ Actual Amount                           | 375.66   | 400   | 150.49                     | None   |    |
| Expenses for Accom  | panying Spouse or De                                 | ependent Child (if applie   | able):                     | ······································       |    |
|   | Transportation<br>Expenses                           | Lodging Expenses  | Meal Expenses              | Other Expenses (Amount & Description)        |    |
| ☐ Good Faith Estimate   |  |   |                            |  |    |
| ☐ Actual Amount   |  |   |                            | <u> </u>                                     |    |
| Provide a description   | n of all meetings and e                              | vents attended. See Sena  | te Rule 35.2(c)(6). (A     | Attach additional pages if                   |    |
| necessary.):  | <u>.                                    </u>         |   |                            |  |    |
| necessary.):  | Allison Feik   | • •   | Meso                       | n Fale                                       |    |
| necessary.):  | Allison Feike<br>(Printed                            | name of traveler)   | allisa                     | (Signature of traveler)                      |    |
| 2/18/2020<br>(Date)   |  | name of traveler)  MEMBER/OFFICER:  | Muso                       | (Signature of traveler)                      |    |

(Signature of Supervising Senator/Officer)

(Revised 1/3/11)



July 9, 2019

Dear Ms. Feikes,

We are pleased to inform you that you have been selected to participate in the Hoover Institution's August 19-21, 2019 Stuart Family Congressional Fellowship Program. This intensive 3-day program includes seminars on Stanford University's campus, where Hoover scholars, such as James Mattis, George Shultz and William Perry will discuss "America in the Next Decade: A Look Forward".

These sessions will challenge you to learn from and debate key philosophical and policy issues with some of the nation's leading thinkers and practitioners. As a participant you will receive round-trip airfare and ground transportation to Stanford University from Washington, DC, housing on Stanford's campus, and those meals that are part of the program.

To proceed, please confirm your agreement to attend by completing this form by the close of business on Monday, July 15th. Due to ethics rules, to maintain your spot, it is imperative that you submit the proper paperwork. Please complete the paperwork provided and items listed below to your ethics committee for review by Monday, July 22nd. Your submission packet should include:

- · Traveler Form (attached for you to fill out)
- · Private Sponsor Certification Form (completed for you and attached)
- · Agenda & Flight itinerary (attached)
- · Copy of this invitation letter

If you have any questions, do not hesitate to contact Paige Mathes (<u>spmathes@stanford.edu</u>; 202.760.3202). Again, thank you for your participation. We look forward to and expect an excellent program.

Sincerely,

Michael G. Franc

Director, Washington D.C. Programs
Hoover Institution, Stanford University

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Date/Time Stamp:

Form RE-1

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(Revised 10/19/15)

### EMPLOYEE PRE-TRAVEL AUTHORIZATION

Pre-Travel Filling Instructions: Complete and submit this form at least 30 days

prior to the travel departure date to the Select Committee on Ethics in SH-220.

Incomplete and late travel submissions will not be considered or approved. This

form must be typed and is available as a fillable PDF on the Committee's website

at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure. Name of Traveler: Allison Feithes Employing Office/Committee: Mike Brown (IN) Private Sponsor(s) (list all): Stanford University's Hoover Institute Travel date(s): 19 - 21, 2019

Note: If you plan to extend the trip for any reason you must notify the Committee. Destination(s): Stanford University, Stanford, C. Explain how this trip is specifically connected to the traveler's official or representational duties: Logistative Assistan for U.S. Senator Hike Brown
this trip allows me to meet with experienced practioners
and occademics in my portfolio Name of accompanying family member (if any):\_ Relationship to Employee: Spouse Child I certify that the information contained in this form is true, complete and correct to the best of my knowledge: TO BE COMPLETED BY SUPERVISING SENATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, Secretary for the Majority, Secretary for the Minority, and Chaplain): Mike Brown (Print Senator's/Officer's Name) an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain. I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate. (signify "yes" by checking box) Signature of Supervising Senator/Officer)